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REMARKS: Serial No. 09/885,332, filed 06/20/2001
Attached hereto is an Information Disclosure Statement

Total Number of Pages (Including This One): 8

FROM: Daniel J. Krueger, Direct Dial No. 713/238-8055

DATE: August 4, 2005

ATTORNEY DOCKET NO. 1391-24800

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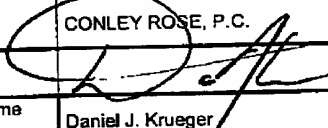
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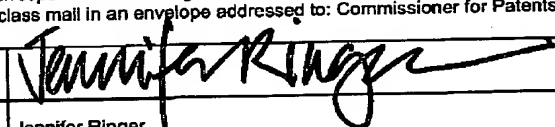
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/885,332	
	Filing Date	June 20, 2001	
	First Named Inventor	Batakrishna MANDAL	
	Art Unit	2123	
	Examiner Name	T. H. Stevens	
Total Number of Pages in This Submission	8	Attorney Docket Number	1391-24800

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	CONLEY ROSE, P.C.		
Signature			
Printed name	Daniel J. Krueger		
Date	August 4, 2005	Reg. No.	42,771

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL **For FY 2005**

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 180

Complete If Known

Application Number 09/885,332
Filing Date June 20, 2001
First Named Inventor Batakrishna MANDAL
Examiner Name T. H. Stevens
Art Unit 2123
Attorney Docket No. 1391-24800

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):
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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Fee (\$): 50 Small Entity Fee (\$): 25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100
Multiple dependent claims 360 180

Total Claims Extra Claims Fee (\$): Fee Paid (\$) Multiple Dependent Claims Fee (\$): Fee Paid (\$)
- 20 or HP = x =
HP = Highest number of total claims paid for, if greater than 20
Indep. Claims Extra Claims Fee (\$): Fee Paid (\$)
- 3 or HP = x =
HP = Highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$): Fee Paid (\$)
- 100 = / 50 = (round up to a whole number) x =

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Supplemental Information Disclosure Statement

180

SUBMITTED BY		Registration No. 42,771	Telephone (713) 238-8000
Signature		(Attorney/Agent)	
Name (Print/Type)	Daniel J. Krueger	Date	August 4, 2005

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Substitute for form 1449/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Complete if Known

Application Number	09/885,332
Filing Date	June 20, 2001
First Named Inventor	Batakrishna MANDAL
Art Unit	2123
Examiner Name	T.H. Stevens
Attorney Docket Number	1391-24800 (2000-IP-002325)

Sheet 2 of 2

NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	AB	Canadian Patent Application No. 2,390,981, Canadian Office Action mailed July 11, 2005, 2 pages.	

Examiner
SignatureDate
Considered

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached. This collection of information is required by 37 CFR 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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